

JURISDICTION

On June 18, 2009, Plaintiff filed an application for supplemental security income, alleging disability beginning July 27, 2004. Tr. 11; 149. Plaintiff reported that he stopped working due to depression and anxiety. Tr. 82; 442. Plaintiff's claim was denied initially and on reconsideration, and he requested a hearing before an administrative law judge (ALJ). Tr. 82-104. A hearing was held on June 25, 2010, at which medical expert Ronald M. Klein, Ph.D., and Plaintiff, who was represented by counsel, testified. Tr. 590-639. ALJ R.J. Payne presided. Tr. 588. At the hearing, Plaintiff agreed to amend the onset date to the date of filing for the application. Tr. 590-91. The ALJ denied benefits on July 8, 2010. Tr. 11-22. The instant matter is before this court pursuant to 42 U.S.C. § 405(g).

STATEMENT OF THE CASE

The facts of the case are set forth in detail in the transcript of proceedings and are briefly summarized here.² At the time of the hearing, Plaintiff was 52 years old. Tr. 149. He has a GED and training as an electrician's helper. Tr. 261; 627-29. Plaintiff has work experience as a fertilizer mixer and bagger, a teacher's

²In 2007, Plaintiff previously filed an unsuccessful claim for SSI benefits. *Foster v. Astrue*, 2011 U.S. Dist. LEXIS 51672, 2011 WL 1807426 (May 11, 2011). Defendant mistakenly referenced that administrative hearing, occurring on December 9, 2008 (Tr. 37-63), instead of the hearing related to the present claim, occurring on June 25, 2010 (Tr. 590-639), in parts of the analysis and argument. ECF No. 24 at n.1.

1 assistant, an electrician helper, a stacker and laborer, and a
2 garbage collector. Tr. 145-46; 153. Plaintiff alleges depression
3 and anxiety related disorders. Tr. 82; 442. Plaintiff was laid off
4 from his last job when he received a DUI. Tr. 614-15. He started
5 using drugs at the age of 13 and had long history of self-medicating
6 with drugs and alcohol. Tr. 261-62. Plaintiff said he no longer
7 uses street drugs and rarely imbibes. Tr. 261-62; 631.

8 ADMINISTRATIVE DECISION

9 At step one, ALJ Payne found that Plaintiff had not engaged in
10 substantial gainful activity since June 18, 2009. Tr. 13. At step
11 two, he found Plaintiff had the severe impairment of dysthymic
12 disorder, drug induced mood disorder, and personality disorder. Tr.
13 13. At step three, the ALJ determined Plaintiff's impairments,
14 alone and in combination, did not meet or medically equal one of the
15 listed impairments in 20 C.F.R., Subpart P, Appendix 1 (20 C.F.R.
16 §§ 416.920(d), 416.925 and 416.926). Tr. 18. The ALJ found
17 Plaintiff has the residual functional capacity ("RFC") to perform a
18 full range of work at all exertional levels but with the following
19 nonexertional limitations:

20 Due to moderate limitations in the ability to interact
21 appropriately with the general public, accept instructions
22 and respond appropriately to criticisms from supervisors,
23 and get along with coworkers or peers without distracting
24 them or exhibiting behavioral extremes, the claimant
25 should work solo and supervisors should be advised of his
26 tendencies. For the first 30-60 days on a job, he should
27 have DVR (Division of Vocational Rehabilitation) follow
28 up.

Tr. 19.

26 In step four findings, the ALJ found Plaintiff's statements
27 regarding pain and limitations were not credible to the extent they
28 were inconsistent with the RFC findings. Tr. 20. The ALJ found

1 that Plaintiff is capable of performing past relevant work as an
2 electrician's helper and laborer. Tr. 22.

3 **STANDARD OF REVIEW**

4 In *Edlund v. Massanari*, 253 F.3d 1152, 1156 (9th Cir. 2001), the
5 court set out the standard of review:

6 A district court's order upholding the Commissioner's
7 denial of benefits is reviewed *de novo*. *Harman v. Apfel*,
8 211 F.3d 1172, 1174 (9th Cir. 2000). The decision of the
9 Commissioner may be reversed only if it is not supported
10 by substantial evidence or if it is based on legal error.
11 *Tackett v. Apfel*, 180 F.3d 1094, 1097 (9th Cir. 1999).
12 Substantial evidence is defined as being more than a mere
13 scintilla, but less than a preponderance. *Id.* at 1098.
14 Put another way, substantial evidence is such relevant
15 evidence as a reasonable mind might accept as adequate to
16 support a conclusion. *Richardson v. Perales*, 402 U.S.
17 389, 401 (1971). If the evidence is susceptible to more
18 than one rational interpretation, the court may not
19 substitute its judgment for that of the Commissioner.
20 *Tackett*, 180 F.3d at 1097; *Morgan v. Commissioner of*
21 *Social Sec. Admin.*, 169 F.3d 595, 599 (9th Cir. 1999).

22 The ALJ is responsible for determining credibility,
23 resolving conflicts in medical testimony, and resolving
24 ambiguities. *Andrews v. Shalala*, 53 F.3d 1035, 1039 (9th
25 Cir. 1995). The ALJ's determinations of law are reviewed
26 *de novo*, although deference is owed to a reasonable
27 construction of the applicable statutes. *McNatt v. Apfel*,
28 201 F.3d 1084, 1087 (9th Cir. 2000).

29 It is the role of the trier of fact, not this court, to resolve
30 conflicts in evidence. *Richardson*, 402 U.S. at 400. If evidence
31 supports more than one rational interpretation, the court may not
32 substitute its judgment for that of the Commissioner. *Tackett*, 180
33 F.3d at 1097; *Allen v. Heckler*, 749 F.2d 577, 579 (9th Cir. 1984).
34 Nevertheless, a decision supported by substantial evidence will
35 still be set aside if the proper legal standards were not applied in
36 weighing the evidence and making the decision. *Browner v. Secretary*
37 *of Health and Human Services*, 839 F.2d 432, 433 (9th Cir. 1988). If
38 substantial evidence exists to support the administrative findings,

1 or if conflicting evidence exists that will support a finding of
2 either disability or non-disability, the Commissioner's
3 determination is conclusive. *Sprague v. Bowen*, 812 F.2d 1226, 1229-
4 1230 (9th Cir. 1987).

5 SEQUENTIAL PROCESS

6 The Commissioner has established a five-step sequential
7 evaluation process for determining whether a person is disabled. 20
8 C.F.R. §§ 404.1520(a), 416.920(a); see *Bowen v. Yuckert*, 482 U.S.
9 137, 140-42 (1987). In steps one through four, the burden of proof
10 rests upon the claimant to establish a prima facie case of
11 entitlement to disability benefits. *Tackett*, 180 F.3d at 1098-99.
12 This burden is met once a claimant establishes that a physical or
13 mental impairment prevents him from engaging in his previous
14 occupation. 20 C.F.R. §§ 404.1520(a)(4), 416.920(a)(4). If a
15 claimant cannot do his past relevant work, the ALJ proceeds to step
16 five, and the burden shifts to the Commissioner to show that (1) the
17 claimant can make an adjustment to other work; and (2) specific jobs
18 exist in the national economy which claimant can perform. *Batson v.*
19 *Commissioner of Social Sec. Admin.*, 359 F.3d 1190, 1193-94 (2004).
20 If a claimant cannot make an adjustment to other work in the
21 national economy, a finding of "disabled" is made. 20 C.F.R. §§
22 404.1520(a)(4)(I-v), 416.920(a)(4)(I-v).

23 ISSUES

24 The question presented is whether substantial evidence exists
25 to support the ALJ's decision denying benefits and, if so, whether
26 that decision is based on proper legal standards. Plaintiff
27 contends the ALJ erred by (1) failing to find Plaintiff had a severe
28 impairment of his left shoulder at step two and failing to obtain

1 testimony from a medical expert about his shoulder impairment; (2)
2 disregarding the opinions of Dr. Nathan and Dr. Arnold; and (3)
3 failing to call a vocational expert at the administrative hearing.
4 ECF No. 21 at 13-19.

5 DISCUSSION

6 A. Step Two

7 Plaintiff contends that the ALJ erred by failing to find that
8 degenerative joint disease in his left shoulder was a severe
9 impairment. ECF No. 21 at 14-15. Plaintiff argued that his left
10 shoulder pain interfered with sleep and with chopping wood. ECF No.
11 21 at 15. At step two of the sequential evaluation, the ALJ
12 determines whether a claimant suffers from a "severe" impairment,
13 i.e., one that significantly limits his physical or mental ability
14 to do basic work activities. 20 C.F.R. §§ 404.1520, 416.920(c). At
15 step two, a claimant must make a threshold showing that his
16 medically determinable impairments significantly limit his ability
17 to perform basic work activities. See *Bowen*, 482 U.S. 137, 107
18 S.Ct. 2287, 96 L. Ed. 2d 119; 20 C.F.R. §§ 404.1520(c), 416.920(c).
19 "Basic work activities" refers to "the abilities and aptitudes
20 necessary to do most jobs." 20 C.F.R. §§ 404.1521(b), 416.921(b).

21 To satisfy step two's requirement of a severe impairment, the
22 claimant must prove the existence of a physical or mental impairment
23 by providing medical evidence consisting of signs, symptoms, and
24 laboratory findings; the claimant's own statement of symptoms alone
25 will not suffice. 20 C.F.R. §§ 404.1508, 416.908. The fact that a
26 medically determinable condition exists does not automatically mean
27 the symptoms are "severe," or "disabling" as defined by the Social
28 Security regulations. See, e.g., *Edlund*, 253 F.3d at 1159-60; *Fair*

1 *v. Bowen*, 885 F.2d 597, 602-03 (9th Cir. 1989); *Key v. Heckler*, 754
2 F.2d 1545, 1549-50 (9th Cir. 1985).

3 In this case, the ALJ found that Plaintiff's left shoulder
4 impingement and degenerative joint disease was non-durational. Tr.
5 18. An impairment must last twelve months to be found severe. 20
6 C.F.R. § 404.1509. As the ALJ noted, Plaintiff was successfully
7 treated for left shoulder pain in 2008, and he experienced relief
8 until 2010. Tr. 18; 585. After another injection in February 2010,
9 Plaintiff reported, "almost immediate relief." Tr. 585. Moreover,
10 the record reveals that after eight sessions of physical therapy in
11 2008, Plaintiff had "full active range of motion." Tr. 503. An
12 impairment that is controlled effectively with treatment is not
13 considered disabling. See *Warre v. Comm'r of Social Security*
14 *Administration*, 439 F.3d 1001, 1006 (9th Cir. 2006). Plaintiff
15 failed to establish that his shoulder pain constituted a severe
16 impairment that persisted for twelve months and, thus, he failed to
17 establish his shoulder impairment qualified as a severe impairment.

18 Similarly, Plaintiff argues that the ALJ erred by failing to
19 obtain testimony from a medical expert regarding his shoulder
20 impairment. Although it is within the ALJ's discretion to develop
21 the record if he determines additional evidence (including medical
22 expert testimony) is necessary to resolve a conflict or clear up
23 ambiguity in the record, the decision to call a medical expert for
24 additional evidence on the nature and severity of impairments is
25 required only "[w]hen . . . in the opinion of the [ALJ] or the
26 Appeals Council the symptoms, signs and laboratory findings reported
27 in the case record suggest that a judgment of equivalence may be
28 reasonable." *Mayes v. Massanari*, 276 F.3d 453, 459-60 (9th Cir.

2001); SSR 96-6p, 1996 SSR LEXIS 3. In this case, the medical records do not reasonably suggest that Plaintiff meets a Listing, and he offers no plausible theory of equivalency. See *Sullivan v. Zebley*, 493 U.S. 521, 530-31, 110 S.Ct. 885, 107 L. Ed. 2d 967 (1990). Under these circumstances, the ALJ did not err by failing to obtain testimony from a medical expert regarding Plaintiff's shoulder impairment.

B. Medical Opinions

Plaintiff contends that the ALJ failed to properly consider the opinions of examining Drs. Arnold and Henry.³ ECF No. 21 at 13-14. Defendant responds by pointing out that the ALJ adopted many of Dr. Henry's findings, and he rejected Dr. Arnold's opinion because it

³Plaintiff's argument on this issue is abbreviated, at best. Plaintiff provides two sentences of analysis:

In this case the ALJ gave the opinion of the ME great weight while essentially dismissing the limitations and problems noted by either of the consulting psychologists. The ALJ did not provide the specific, legitimate reasons to dismiss the opinions of either Dr. Nathan [sic] or Dr. Arnold both of whom actually interviewed and tested Foster.

ECF No. 21 at 13-14. The Ninth circuit "has repeatedly admonished that we cannot 'manufacture arguments for an appellant' and therefore we will not consider any claims that were not actually argued in appellant's opening brief." *Independent Towers of Wash. v. Wash.*, 350 F.3d 925, 929 (9th Cir. 2003), quoting *Greenwood v. Fed. Aviation Admin.*, 28 F.3d 971, 977 (9th Cir. 1994); see also *Carmickle v. Comm'r Soc. Sec. Admin.*, 533 F.3d 1155, 1161 n.2 (9th Cir. 2008)(court will not consider issues unless specifically and distinctly argued in opening appellate brief).

1 was inconsistent with other substantial evidence in the record and
2 was not supported by objective medical evidence. ECF No. 24 at 9-
3 10.

4 As a general rule, more weight should be given to the opinion
5 of a treating source than to the opinion of doctors who do not treat
6 the claimant. *Lester v. Chater*, 81 F.3d 821, 830 (9th Cir. 1995).
7 Where the treating doctor's opinion is not contradicted by another
8 doctor, it may be rejected only for "clear and convincing" reasons.
9 *Id.* Where the treating doctor's opinion is contradicted by another
10 doctor, the ALJ may not reject this opinion without providing
11 "specific and legitimate reasons" supported by substantial evidence
12 in the record for so doing. *Murray v. Heckler*, 722 F.2d 499, 502
13 (9th Cir. 1983).

14 The opinion of an examining physician is, in turn, entitled to
15 greater weight than the opinion of a nonexamining physician. *Pitzer*
16 *v. Sullivan*, 908 F.2d 502, 506 (9th Cir. 1990). The Commissioner
17 must provide "clear and convincing" reasons for rejecting the
18 uncontradicted opinion of an examining physician. *Pitzer*, 908 F.2d
19 at 506. Where contradicted by another doctor, the ALJ may reject an
20 examining physician's opinions for specific and legitimate reasons
21 that are supported by substantial evidence in the record. *Andrews*,
22 53 F.3d at 1043.

23 **1. John Arnold, Ph.D.**

24 The ALJ gave little weight to Dr. Arnold's opinion because it
25 conflicted with the longitudinal record in finding Plaintiff had
26 cognitive limitations, and Dr. Arnold appeared to rely upon
27 Plaintiff's subjective description of his symptoms. Tr. 21.
28 Inconsistency with the medical record is a specific and legitimate

1 reason for affording a treating physician's opinion less weight.
2 *Magallanes v. Bowen*, 881 F.2d at 751 (a lack of supporting clinical
3 findings is a valid reason for rejecting a treating physician's
4 opinion). In this case, the medical records from the other sources
5 reveal that Plaintiff's cognitive functioning during the relevant
6 period was not significantly limited, with the exception of the
7 ability to work in coordination with others without being distracted
8 by them. Tr. 414-16; 442; 579. This is a specific and legitimate
9 reason to discount Dr. Arnold's opinion.

10 Also as the ALJ found, Dr. Arnold administered only the Trail
11 Making objective test during his October 27, 2009, examination of
12 Plaintiff. Tr. 21; 439. In the absence of objective medical tests,
13 it is apparent Dr. Arnold primarily relied upon Plaintiff's
14 subjective complaints to arrive at his opinion. Where a medical
15 source's opinion is based largely on the Plaintiff's own subjective
16 description of symptoms, and the ALJ has discredited the Plaintiff's
17 claim as to those subjective symptoms, the ALJ may reject that
18 opinion. *Fair v. Bowen*, 885 F.2d at 605. In this case, the ALJ
19 discredited Plaintiff's subjective complaints, and the Plaintiff did
20 not appeal the determination of his credibility. As the ALJ noted,
21 Dr. Arnold based his opinion on reported symptoms such as a reported
22 tendency to misperceive harm in benign work situations and grow
23 angry as a result, sleep disturbances which would result in missing
24 work and a slow pace, and difficulty working around co-workers and
25 customers. Tr. 436; 439. Because Plaintiff was not credible, the
26 ALJ properly gave little weight to this opinion that was based upon
27 Plaintiff's subjective complaints. As a result, the ALJ's reasons
28 for giving little weight to Dr. Arnold's opinion were specific and

1 legitimate and supported by the record.⁴

2 **2. Nathan Henry, Psy.D.**

3 The ALJ extensively reviewed the findings and medical report
4 produced by Dr. Henry. Tr. 13-15. In weighing the opinion, the ALJ
5 noted that Dr. Henry opined Plaintiff did not present with
6 psychiatric problems that would completely prevent him from working.
7 Tr. 21. The form completed by Dr. Henry indicated that cognitively,
8 Plaintiff was moderately limited in his ability to exercise judgment
9 and make decisions. Tr. 258. Additionally, he opined that
10 socially, Plaintiff was markedly limited in his ability to respond
11 appropriately and tolerate the pressure and expectations of a normal
12 work setting, and moderately limited in several other social
13 categories. Tr. 258.

14 In the accompanying narrative report, Dr. Henry explained that
15 Plaintiff's test results revealed no cognitive/neurological
16 impairment, and no problems/deficits related to cognitive
17 flexibility, visual scanning ability or processing speed. Tr. 263-
18 64. He also explained that Plaintiff's MMPI-2 test revealed
19 Plaintiff endorsed "an extreme degree of pathology" that consisted
20 of more symptoms than most patients reported, and likely reflected
21 a pattern of exaggeration. Tr. 265. Dr. Henry warned that
22 Plaintiff's prognosis was guarded, in light of the "chronic and
23 characterological nature of many of his symptoms and his risk for
24 relapse into substance abuse." Tr. 266.

25
26 ⁴It is notable that Dr. Arnold estimated that Plaintiff would
27 be impaired for six to nine months, less than the durational
28 requirement of one year. Tr. 440; see 20 C.F.R. § 404.1509.

1 Dr. Henry concluded in part that Plaintiff's impairments do
2 not preclude him from working. "Though his personality disorder
3 traits and mood/anxiety symptoms would be expected to impact his
4 ability and/or willingness to obtain and sustain gainful employment,
5 he does not appear to present with severe psychiatric symptoms that
6 might be expected to completely keep him from begin able to work."
7 Tr. 266-67. The ALJ agreed with Dr. Henry, inasmuch as the ALJ
8 found Plaintiff could sustain gainful employment with some
9 allowances related to Plaintiff's social limitations. In the
10 absence of specific argument or analysis from Plaintiff explaining
11 or identifying Dr. Henry's opinions that were purportedly rejected
12 by the ALJ, Plaintiff's claim on this issue fails.

13 **C. Vocational Experts**

14 Plaintiff contends that the ALJ erred by failing to obtain
15 testimony from a vocational expert. ECF No. 21 at 18-19. In this
16 case, the ALJ found at step four that Plaintiff could perform his
17 past relevant work. Tr. 22. Contrary to Plaintiff's assertion, an
18 ALJ is not required to question a vocational expert at step four.
19 Instead, an ALJ may consult a vocational expert to determine whether
20 the claimant can return to his or her past work. See 20 C.F.R. §
21 404.1560(b)(2) ("We may use the services of vocational experts or
22 vocational specialists . . . to obtain evidence we need to help us
23 determine whether you can do your past relevant work, given your
24 residual functional capacity"); accord 20 C.F.R. § 416.960(b)(2); see
25 also *Matthews v. Shalala*, 10 F.3d 678, 681 (9th Cir.
26 1993)(vocational expert testimony at step four useful, but not
27 required); *Crane v. Shalala*, 76 F.3d 251, 255 (9th Cir. 1996)
28 (determination that claimant could perform past work rendered

1 vocational expert testimony unnecessary). Because the decision to
2 consult a VE at step four is discretionary, Plaintiff's assertion
3 that the ALJ was required to call a vocational expert at step four
4 is not persuasive. The ALJ did not err.

5 **CONCLUSION**

6 Having reviewed the record and the ALJ's findings, the court
7 concludes the ALJ's decision is supported by substantial evidence
8 and is not based on legal error. Accordingly,

9 **IT IS ORDERED:**

10 1. Defendant's Motion for Summary Judgment, **ECF No. 23**, is
11 **GRANTED**.

12 2. Plaintiff's Motion for Summary Judgment, **ECF No. 20**, is
13 **DENIED**.

14 The District Court Executive is directed to file this Order and
15 provide a copy to counsel for Plaintiff and Defendant. Judgment
16 shall be entered for **DEFENDANT** and the file shall be **CLOSED**.

17 DATED June 6, 2013.

18
19 S/ CYNTHIA IMBROGNO
20 UNITED STATES MAGISTRATE JUDGE
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